

# Graduate Petition for Reinstatement



**SAN JOSÉ STATE  
UNIVERSITY**

**San José State University  
Graduate Admissions &  
Program Evaluations  
(GAPE) Extended Zip 0017**

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name, M.I.

\_\_\_\_\_  
Student ID

\_\_\_\_\_  
Previous Name, if any

\_\_\_\_\_  
Home Street Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Email Address

**Required Signatures**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

<b>Approved</b>	<b>Denied</b>
<input type="checkbox"/>	<input type="checkbox"/>
_____ <b>College Associate Dean (print)</b>	
_____ <b>College Associate Dean (signature)</b>	
_____ <b>Date</b>	

<b>Approved</b>	<b>Denied</b>
<input type="checkbox"/>	<input type="checkbox"/>
_____ <b>Associate Dean of Graduate Studies &amp; Research (print)</b>	
_____ <b>Associate Dean of Graduate Studies &amp; Research (signature)</b>	
_____ <b>Date</b>	

**INSTRUCTIONS**

Reinstatement allows a student who has been disqualified at SJSU to become eligible for enrollment once again. Readmission is similar to an original admission. All students must reapply by the application deadline via CSU Mentor to be able to return as a matriculated student. Apply for the next available term as early as possible, even if prior to the completion of the reinstatement process. The major listed on your application must match the major on this petition. Submit signed petition to the Office of Graduate Studies and Research, which will route it through the Registrar's Office.

**CATEGORIES FOR REINSTATEMENT (check the one category under which you are applying)**

- (1) Extenuating Circumstances** - for serious and compelling reasons clearly beyond the student's control. Examples include administrative error, employment, military, natural disaster, death of immediate family member, personal health or serious family illness, and divorce.
- (2) Special Consideration** - for students who have spent substantial time away from SJSU since their disqualification (five years or more) and feel that their life experiences have prepared them for a successful return to school.
- (3) Petitioned Grade Change** - for changes of grade approved under Section III (Grade Appeal) and Section IV (Change of Grade) of University Policy S09-7 (<http://www.sjsu.edu/senate/S09-7.htm>). To qualify, the change of grade must be clearly explained in an attachment.
- (4) Program of Study (POS)** - classes appropriate to the student's major for 6-9 units per semester, letter graded, upper division, and taken through Open University or SJSU's Extended Studies winter or summer session. The 100-level courses may or may not be part of the graduation requirements for the student's degree program. Graduate (200-level) courses are not permitted. Also precluded are extension courses taken at another university, 300-level or 400-level courses, and lower division courses. Courses previously completed may not, under any circumstances, be included in the POS. Thus full approval (all signatures) for the courses must be garnered before the courses are taken. The POS must include work applicable to the major. Once the program of study has been completed such that the student earns a minimum grade point average of 3.3 (B+), he or she will be reinstated. Fill in program in section below.

The POS deadlines are firm and are as follows:

- Spring POS is due by March 1st.**
- Summer POS is due by July 1st.**
- Fall POS is due by October 1st.**

I wish to be reinstated for \_\_\_\_\_ in \_\_\_\_\_  
**Semester/Year**
**Major/Program**

**Proposed Program of Study (to be completed ONLY if POS option is selected above)**

Term & Year	Dept. & Course No	Course Title	Units

**REQUIRED ATTACHMENTS (photocopies acceptable)**

- |   |   |
|---|---|
| <input type="checkbox"/> Complete SJSU transcripts      | <input type="checkbox"/> Candidacy form, if filed |
| <input type="checkbox"/> Documentation of circumstances | <input type="checkbox"/> Explanation of reasons   |

**RECOMMENDATIONS FOR APPROVAL (letter may be attached for additional support)**

_____ Graduate Advisor or Master's Committee Chair (print)	_____ Graduate Advisor or Master's Committee Chair (signature)
_____ Date	
_____ Department Chair or School Director (print)	_____ Department Chair or School Director (signature)
	_____ Date

Note to advisors and chairs/directors: implicit in your signing of this form is an assurance to the student that he or she will be readmitted to your program upon application for readmission. Readmission to your program is guaranteed even at times of restricted admission. You are not compelled to sign this form and should take into account space considerations in your future program before doing so.

Comments

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_